**CLUB NAME HERE – High Level Safety Risk Assessment**

**Age Group: Venue: Date of Check: Person doing Check:**

| **Category**  | **Checks** (examples, adapt as necessary) | **Check performed (Risks appropriately mitigated?)** | **What further action is necessary?** |
| --- | --- | --- | --- |
|  |  |  | **Action Required** | **By Whom** | **When** | **Done** |
| **Surface** | Surface clear and free from obstructions?  |  |  |  |  |  |
| Surface appropriate to the activity being performed |  |  |  |  |  |
| **Equipment** | Equipment fit and sound for the activity and group ability/size/age? |  |  |  |  |  |
| Does it confirm to BF Safety Guidelines? |  |  |  |  |  |
| **Environment** | Conditions of use of communal facilities (toilets, changing rooms) clearly signposted |  |  |  |  |  |
| Movement of people clearly signposted and can be safely achieved whilst observing social distancing  |  |  |  |  |  |
| Entry and exits clearly marked and protocols around usage in place |  |  |  |  |  |
| Appropriate Ventilation  |  |  |  |  |  |
| **Participants** | Attendance register up to date with emergency contact details  |  |  |  |  |  |
| Medical details up to date on registration forms, stored confidentially and shared with coaches as required. |  |  |  |  |  |
| Participants suitably attired and equipped for activity in accordance with BF Safety Guidelines |  |  |  |  |  |
| Participants completed pre-session (COVID-19) questionnaires/ |  |  |  |  |  |
| Numbers of participants within limit such that social distancing can be observed at all times |  |  |  |  |  |
| **Officials** | Coaches qualified to deliver activities |  |  |  |  |  |
| Welfare Officer present and signposted to participants. |  |  |  |  |  |
| All officials on relevant BF register  |  |  |  |  |  |
| Criminal record checks in place where appropriate |  |  |  |  |  |
| **Accident/ Emergency** | Emergency evacuation protocols/procedures in place and posted for all to see |  |  |  |  |  |
| Emergency exits clearly marked and not obstructed |  |  |  |  |  |
| **Hygiene** | Hygiene protocols established, communicated in advance to all participants and clearly signposted |  |  |  |  |  |
| Disinfecting protocols in place for all (shared) equipment  |  |  |  |  |  |

**Activity assessed as OK to proceed: Y/N Signature:**